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990-PF

Form
Department of the Treasury
Internal Revenue ServiceReturn of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

2009

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements.

For calendar year 2009, or tax year beginning 10/01, 2009, and ending 09/30, 2010

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation JEROME LYLE RAPPAPORT CHARITABLE FOUNDATION C/O RAPPAPORT ASKERKOFF & GELLES		A Employer identification number 31-1485041
	Number and street (or P O box number if mail is not delivered to street address) 60 STATE STREET, SUITE 1525	Room/suite	B Telephone number (see page 10 of the instructions) (617) 227-7345
	City or town, state, and ZIP code BOSTON, MA 02109		C If exemption application is pending, check here ☐
	H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		D 1 Foreign organizations, check here ☐ 2 Foreign organizations meeting the 85% test, check here and attach computation ☐
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 11,420,131.		J Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) _____	E If private foundation status was terminated under section 507(b)(1)(A), check here ☐ F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule)	NONE			
2	Check ☒ if the foundation is not required to attach Sch B.				
3	Interest on savings and temporary cash investments				
4	Dividends and interest from securities	182,929.	178,092.		
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	-50,167.			
b	Gross sales price for all assets on line 6a	1,101,164.			
7	Capital gain net income (from Part IV, line 2)		- 0 -		
8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less Cost of goods sold				
c	Gross profit or (loss) (attach schedule)				
11	Other income (attach schedule)	8,831.	11,294.		STMT 1
12	Total. Add lines 1 through 11	141,593.	189,386.		
13	Compensation of officers, directors, trustees, etc.	134,082.			134,082.
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule)				
b	Accounting fees (attach schedule)				
c	Other professional fees (attach schedule)	51,675.	51,675.		
17	Interest				
18	Taxes (attach schedule) (see page 14 of the instructions)	7,851.	7,513.		
19	Depreciation (attach schedule) and depletion				
20	Occupancy				
21	Travel, conferences, and meetings	997.			997.
22	Printing and publications	6,980.			6,980.
23	Other expenses (attach schedule) STMT. 4	1,897.	25,235.		1,610.
24	Total operating and administrative expenses. Add lines 13 through 23	203,482.	84,423.		143,669.
25	Contributions, gifts, grants paid	529,000.			529,000.
26	Total expenses and disbursements. Add lines 24 and 25	732,482.	84,423.		672,669.
27	Subtract line 26 from line 12.				
a	Excess of revenue over expenses and disbursements	-590,889.			
b	Net investment income (if negative, enter -0-)		104,963.		
c	Adjusted net income (if negative, enter -0-)				

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing		55,858.	55,144.	55,144.
	2	Savings and temporary cash investments		2,595,714.	1,828,506.	1,828,506.
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable				
		Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 16 of the instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less: allowance for doubtful accounts				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10 a	Investments - U S and state government obligations (attach schedule) STMT 5		340,000.	325,000.	325,000.
	b	Investments - corporate stock (attach schedule) STMT 6		4,996,550.	5,775,583.	6,822,745.
	c	Investments - corporate bonds (attach schedule)				
	11	Investments - land, buildings, and equipment basis				
	Less: accumulated depreciation (attach schedule)					
12	Investments - mortgage loans					
13	Investments - other (attach schedule) STMT 7		2,988,461.	2,413,236.	2,388,736.	
14	Land, buildings, and equipment basis					
	Less: accumulated depreciation (attach schedule)					
15	Other assets (describe)					
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		10,976,583.	10,397,469.	11,420,131.	
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe)				
23	Total liabilities (add lines 17 through 22)					
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ☐					
	and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ☒					
	27	Capital stock, trust principal, or current funds		10,976,583.	10,397,469.	
	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
	30	Total net assets or fund balances (see page 17 of the instructions)		10,976,583.	10,397,469.	
31	Total liabilities and net assets/fund balances (see page 17 of the instructions)		10,976,583.	10,397,469.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	10,976,583.
2	Enter amount from Part I, line 27a	2	-590,889.
3	Other increases not included in line 2 (itemize) SEE STATEMENT 8	3	11,775.
4	Add lines 1, 2, and 3	4	10,397,469.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	10,397,469.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a SEE PART IV DETAIL					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)			2	-39,325.	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8.			3		

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.**1** Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2008	558,970.	10,509,783.	0.05318568423
2007	542,730.	12,905,245.	0.04205499392
2006	459,821.	10,930,020.	0.04206954791
2005	371,932.	9,860,487.	0.03771943516
2004	510,493.	8,965,763.	0.05693804309
2 Total of line 1, column (d)			2 0.23196770431
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 0.04639354086
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5			4 11,316,681.
5 Multiply line 4 by line 3			5 525,021.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 1,050.
7 Add lines 5 and 6			7 526,071.
8 Enter qualifying distributions from Part XII, line 4			8 672,669.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1			
Date of ruling or determination letter _____ (attach copy of ruling letter if necessary - see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b		1	1,050.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	
3 Add lines 1 and 2		3	1,050.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	NONE
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	1,050.
6 Credits/Payments:			
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a	2,016.	
b Exempt foreign organizations-tax withheld at source	6b	NONE	
c Tax paid with application for extension of time to file (Form 8868)	6c	NONE	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments Add lines 6a through 6d	7	2,016.	
8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	966.	
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax ☒ 966. Refunded ☐	11		

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$ _____ (2) On foundation managers ► \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		X
If "Yes," attach a detailed description of the activities.		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		X
If "Yes," attach the statement required by General Instruction T		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ► STMT 9		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? ☐ Yes ☒ No
Organizations relying on a current notice regarding disaster assistance check here ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☒ Yes ☐ No
If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No
If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 10		134,082.	-0-	-0-

2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		NONE	NONE	NONE

Total number of other employees paid over \$50,000 ☐ NONE

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services** (see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		NONE

Total number of others receiving over \$50,000 for professional services **NONE****Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 GRANTS WERE MADE TO CHARITABLE ORGANIZATIONS DESCRIBED UNDER IRC SECTION 501(C)	529,000.
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments. See page 24 of the instructions.	
3 NONE	
Total. Add lines 1 through 3	

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	11,386,925.
b	Average of monthly cash balances	1b	102,091.
c	Fair market value of all other assets (see page 24 of the instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	11,489,016.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	11,489,016.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions)	4	172,335.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	11,316,681.
6	Minimum investment return. Enter 5% of line 5	6	565,834.

Part XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	565,834.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	1,050.
b	Income tax for 2009. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	1,050.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	564,784.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	564,784.
6	Deduction from distributable amount (see page 25 of the instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	564,784.

Part XII Qualifying Distributions (see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	672,669.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	672,669.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	1,050.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	671,619.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				564,784.
2 Undistributed income, if any, as of the end of 2009:				
a Enter amount for 2008 only			523,425.	
b Total for prior years 20 <u>07</u> , 20 <u> </u> , 20 <u> </u>		56,603.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004	NONE			
b From 2005	NONE			
c From 2006	NONE			
d From 2007	NONE			
e From 2008	NONE			
f Total of lines 3a through e	NONE			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ <u>672,669.</u>				
a Applied to 2008, but not more than line 2a			523,425.	
b Applied to undistributed income of prior years (Election required - see page 26 of the instructions)	STMT 12	56,603.		
c Treated as distributions out of corpus (Election required - see page 26 of the instructions)	NONE			
d Applied to 2009 distributable amount				92,641.
e Remaining amount distributed out of corpus	NONE			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).)	NONE			NONE
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	NONE			
b Prior years' undistributed income. Subtract line 4b from line 2b		NONE		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		NONE		
d Subtract line 6c from line 6b. Taxable amount - see page 27 of the instructions		NONE		
e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see page 27 of the instructions			NONE	
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010.				472,143.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)	NONE			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	NONE			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	NONE			
10 Analysis of line 9:				
a Excess from 2005	NONE			
b Excess from 2006	NONE			
c Excess from 2007	NONE			
d Excess from 2008	NONE			
e Excess from 2009	NONE			

Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9) **NOT APPLICABLE**

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) or

4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon.					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see page 28 of the instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

SEE STATEMENT 13

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed:

SEE STATEMENT 14

b The form in which applications should be submitted and information and materials they should include:

SEE ATTACHED STATEMENT FOR LINE 2

c Any submission deadlines:

SEE ATTACHED STATEMENT FOR LINE 2

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

SEE ATTACHED STATEMENT FOR LINE 2

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year SEE STATEMENT 18				
Total			▶ 3a	529,000.
b Approved for future payment				
Total			▶ 3b	

1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?	Yes	No
a	Transfers from the reporting foundation to a noncharitable exempt organization of:		
	(1) Cash	1a(1)	X
	(2) Other assets	1a(2)	X
b	Other transactions:		
	(1) Sales of assets to a noncharitable exempt organization	1b(1)	X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)	X
	(3) Rental of facilities, equipment, or other assets	1b(3)	X
	(4) Reimbursement arrangements	1b(4)	X
	(5) Loans or loan guarantees	1b(5)	X
	(6) Performance of services or membership or fundraising solicitations	1b(6)	X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c	X
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

[illegible]

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer or trustee

Date _____

Title

Preparer's
signature

Date _____

Check if self-employed ☐

Preparer's identifying
number (See **Signature** on
page 30 of the instructions)
P00709770

Firm's name (or yours if self-employed), address, and ZIP code

FIDUCIARY TRUST COMPANY

EIN ► 04-1309690

P.O. BOX 55806

02205-5806

Phone no 617-482-5270

Form **990-PF** (2009)

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of Property		Description				Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis	Gain or (loss)	
		TOTAL SHORT-TERM CAPITAL GAIN DIVIDENDS				1,286.	
		TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS				4,760.	
110,890.00		10412.168 ARTIO INTERNATIONAL EQUITY II PROPERTY TYPE: SECURITIES 166,265.00				P 12/27/2007 -55,375.00	02/08/2010
208,087.00		2000. ISHARES BARCLAYS TIP SECURITIES ET PROPERTY TYPE: SECURITIES 197,379.00				P 12/31/2008 10,708.00	03/04/2010
33,905.00		1000. CRANE COMPANY COM PROPERTY TYPE: SECURITIES 22,563.00				P 10/13/2000 11,342.00	03/22/2010
1,292.00		2000. CRYSTAL RIVER CAPITAL INC COM PROPERTY TYPE: SECURITIES 45,389.00				P 09/26/2006 -44,097.00	03/22/2010
49,594.00		500. EDWARDS LIFESCIENCES CORP PROPERTY TYPE: SECURITIES 11,456.00				P 08/25/2000 38,138.00	03/22/2010
10,314.00		300. INTUIT COM PROPERTY TYPE: SECURITIES				P 09/29/1999 10,314.00	03/22/2010
51,841.00		1067. S&P NORTH AMERICAN TECH SOFTWARE I PROPERTY TYPE: SECURITIES 42,787.00				P 07/21/2009 9,054.00	03/22/2010
75,947.00		7504.69 LEUTHOLD ASSET ALLOCATION FUND I PROPERTY TYPE: SECURITIES 80,000.00				P 07/09/2008 -4,053.00	03/22/2010
502.00		46.391 VANGUARD GNMA FUND ADMIRAL SHS PROPERTY TYPE: SECURITIES 495.00				P 12/30/2009 7.00	03/22/2010
267,540.00		24726.409 VANGUARD GNMA FUND ADMIRAL SHS PROPERTY TYPE: SECURITIES 255,671.00				P 07/09/2008 11,869.00	03/22/2010

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
73,887.00		1600. WISDOMTREE INT'L SMALLCAP DIV FUND PROPERTY TYPE: SECURITIES 106,916.00				P	08/23/2007	03/22/2010
							-33,029.00	
211,319.00		1. VERO DISTRESSED ABS OPPORTUNITY FUND PROPERTY TYPE: SECURITIES 211,568.00				P	09/09/2008	09/10/2010
							-249.00	
TOTAL GAIN(LOSS)							----- -39,325. =====	

FORM 990PF, PART I - OTHER INCOME

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
PARTNERSHIP INCOME	8,831.	11,294.
	-----	-----
TOTALS	8,831.	11,294.
	=====	=====

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

=====

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
-----	-----	-----
FIDUCIARY TRUST CO.	51,675.	51,675.
INVESTMENT MANAGEMENT		
	-----	-----
TOTALS	51,675.	51,675.
	=====	=====

FORM 990PF, PART I - TAXES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
EXCISE TAX	2,598.	
FOREIGN TAX ON DIVS	5,253.	7,513.
	-----	-----
TOTALS	7,851.	7,513.
	=====	=====

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	CHARITABLE PURPOSES
-----	-----	-----	-----
OFFICE EXPENSE	1,411.		1,411.
FILING FEE - FORM PC	125.		125.
DEPOSITARY FEES	287.	287.	
BANK CHARGES	74.		74.
PARTNERSHIP EXPENSES		24,948.	
	-----	-----	-----
TOTALS	1,897.	25,235.	1,610.
	=====	=====	=====

JEROME LYLE RAPPAPORT CHARITABLE FOUNDATION

31-1485041

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS
=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
250000 CLARK CNTY NEV POLLUTN	250,000.	250,000.
8.767 1/1/2036		
75000 WAKE CNTY NC INDL FACS	75,000.	75,000.
6.869 7/15/2030		
TOTALS	-----	-----
	325,000.	325,000.
	=====	=====

BOOK VALUE ASSET STATEMENT

AS OF 09/30/10

31-1485041

JEROME LYLE RAPPAPORT FDN.

FORM 990-PF, PART II - BALANCE SHEET

PAGE 1

ACCOUNT NO. 73837400

PAR VALUE SHARES/UNITS	DESCRIPTION	COST	BOOK VALUE	MARKET VALUE	ESTIMATED ANNUAL INCOME
CASH/CASH EQUIVALENTS					
669120.66	DREYFUS GOVT CASH MANAGEMENT-INSTL SHS	669,120.66	669,120.66	669,120.66	386.86
EQUITIES/COMMON STOCK - STATEMENT 6					
2000.00	3M COMPANY COM	146,482.60	146,482.60	173,420.00	4,200.00
4300.00	ABBOTT LABORATORIES	60,052.18	168,229.54	224,632.00	7,568.00
10000.00	ANALOG DEVICES COM	829.46	752,500.00	313,800.00	8,800.00
3000.00	APACHE CORP COM	152,160.00	157,505.18	293,280.00	1,800.00
4370.00	BANK OF AMERICA CORP COM	7,154.42	148,648.40	57,257.93	174.80
6000.00	BAXTER INTERNATIONAL INC COM	25,766.99	214,687.50	286,260.00	6,960.00
1200.00	CHUBB CORP COM	43,945.50	43,945.50	68,388.00	1,776.00
2000.00	COLGATE-PALMOLIVE CO COM	8,816.09	111,375.00	153,720.00	4,240.00
9845.00	CRANE COMPANY COM	222,127.81	222,127.81	373,519.30	9,057.40
3000.00	DIAGEO PLC SPONSORED ADR	174,420.00	174,420.00	207,030.00	7,047.00
3200.00	EDWARDS LIFESCIENCES CORP	24,050.58	35,900.00	214,560.00	5,984.00
3400.00	EXXON MOBIL CORP COM	132,954.38	146,218.84	210,086.00	
300.00	GOOGLE INC CL A	127,976.76	127,976.76	157,737.00	
6912.00	HEINEKEN N V ADR	5,797.59	129,945.60	179,476.99	2,260.22
2000.00	HEWLETT-PACKARD CO COM	80,880.00	80,880.00	84,140.00	640.00
4000.00	HONEYWELL INTERNATIONAL INC COM	7,948.93	139,000.00	175,760.00	4,840.00
900.00	INTUIT INC COM	0.01	20,137.50	39,429.00	
3640.00	ISHARES BARCLAYS 1-3 YEAR CREDIT BOND	363,323.74	363,323.74	382,363.80	10,672.48
3400.00	ISHARES MSCI EMERGING MKT INDEX FUND	138,716.60	138,716.60	152,218.00	2,029.80
2500.00	JOHNSON & JOHNSON COM	136,100.00	136,100.00	154,900.00	5,400.00
7139.00	KONINKLIJKE PHILIPS ELECTRONICS N V ADR	20,046.61	353,730.09	223,593.48	5,661.23
2500.00	NATIONAL OILWELL VARCO INC COM	89,315.00	89,315.00	111,175.00	1,000.00
3000.00	NOVARTIS AG SPONSORED ADR	153,226.80	153,226.80	173,010.00	4,959.00
4000.00	NYSE EURONEXT COM	223,165.00	223,165.00	114,280.00	4,800.00
5700.00	PEPSICO INC COM	6,311.62	182,771.73	378,708.00	10,944.00
4018.00	PIMCO 1-5 YEAR US TIPS INDEX ETF	208,251.33	208,251.33	210,181.58	2,768.40
1500.00	ROYAL DUTCH SHELL PLC SPONSORED ADR A SH	71,351.40	71,351.40	90,450.00	4,284.00

31-1485041

JEROME LYLE RAPAPORT FDN.

Form 990 PF, PART II - BALANCE SHEET

PAR VALUE SHARES/UNITS	DESCRIPTION	COST	BOOK VALUE	MARKET VALUE	ESTIMATED ANNUAL INCOME
---------------------------	-------------	------	------------	--------------	----------------------------

EQUITIES/Common Stock (CONT.) - STATEMENT 6

1933.00	S&P NORTH AMERICAN TECH SOFTWARE INDX FD	77,513.30	77,513.30	100,245.38	
900.00	SPDR GOLD TRUST	83,083.29	83,083.29	115,119.00	
7500.00	STAPLES INC COM	68,125.00	73,000.00	156,900.00	2,700.00
6000.00	STERICYCLE INC COM	133,093.20	133,093.20	416,880.00	
7500.00	TEVA PHARMACEUTICAL INDS LTD ADR	219,428.85	220,223.75	395,625.00	4,650.00
6000.00	TORTOISE ENERGY INFRASTRUCTURE CORP	192,549.74	192,549.74	205,500.00	12,960.00
2000.00	TOTAL S A ADR	134,876.05	134,876.05	103,200.00	5,226.00
3500.00	US BANCORP COM (NEW)	80,640.46	77,501.62	75,670.00	700.00
2000.00	WELLS FARGO & CO	41,913.06	43,810.00	50,230.00	400.00

TOTAL EQUITIES/Common Stock

3,662,394.35	5,775,582.87	6,822,745.46	144,502.33
--------------	--------------	--------------	------------

MUTUAL FUND INVESTMENTS - STATEMENT 7

8946.999	ABSOLUTE STRATEGIES FUND INST'L	95,106.60	95,106.60	96,269.71	787.34
13875.927	ALLIANZ NFJ INTL VALUE FUND	186,978.50	186,978.50	270,580.58	5,467.12
6606.398	FRANKLIN INT'L SMALL CAP GROWTH ADV	95,000.00	95,000.00	103,390.13	145.34
22228.913	HUSSMAN STRATEGIC GROWTH FUND	284,745.03	284,745.61	296,978.28	377.89
3466.01	OAKMARK INTERNATIONAL FUND CL I	42,594.60	64,414.44	63,012.06	405.52
20516.717	TEMPLETON GLOBAL BOND FUND ADVISOR CL	270,000.00	270,000.00	280,463.52	12,269.00
16071.429	THOMAS WHITE INTERNATIONAL FUND	179,739.64	179,739.64	264,214.29	3,101.79
7405.457	THORNBERG INTL VALUE FUND I	175,250.00	175,250.00	196,762.99	1,880.99
	MADISON AVE CDO I LTD PREF SHS 144A		250,000.00	5,062.50	
	NEW BOSTON INVESTMENT FUND LP V		500,000.00	500,000.00	
	NEW BOSTON INVESTMENT FUND LP VII		312,001.50	312,001.50	

OTHER INVESTMENTS:

2,413,236.00	2,388,736.00 (ROUNDED)
--------------	------------------------

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES
=====

DESCRIPTION -----	AMOUNT -----
PARTNERSHIP BOOK VALUE ADJUSTMENT	11,775.

TOTAL	11,775.
	=====

STATE(S) WHERE THE FOUNDATION IS REGISTERED
=====

FL
MA

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

OFFICER NAME:

JEROME LYLE RAPPAPORT

ADDRESS:

60 STATE STREET

BOSTON, MA 02109

TITLE:

TRUSTEE

OFFICER NAME:

PHYLLIS E. RAPPAPORT

ADDRESS:

60 STATE STREET

BOSTON, MA 02109

TITLE:

TRUSTEE

OFFICER NAME:

JAMES W. RAPPAPORT

ADDRESS:

60 STATE STREET

BOSTON, MA 02109

TITLE:

TRUSTEE

OFFICER NAME:

NANCY RAPPAPORT

ADDRESS:

60 STATE STREET

BOSTON, MA 02109

TITLE:

TRUSTEE

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

OFFICER NAME:

JON RAPPAPORT

ADDRESS:

60 STATE STREET

BOSTON, MA 02109

TITLE:

TRUSTEE

OFFICER NAME:

KATHERINE EDWARDS

ADDRESS:

60 STATE STREET

BOSTON, MA 02109

TITLE:

EXECUTIVE DIRECTOR

COMPENSATION 134,082.

TOTAL COMPENSATION: 134,082.

=====

990PF, PART XIII, LINE 4(b) ELECTION UNDER SEC. 53.4942(a)-3(d)(2)

=====

THE FOUNDATION ELECTS TO TREAT \$56,603.00 OF ITS CURRENT YEAR
DISTRIBUTIONS AS BEING MADE OUT OF UNDISTRIBUTED INCOME FROM
TAX YEAR 2007.

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

JEROME LYLE RAPPAPORT
JAMES W. RAPPAPORT

RECIPIENT NAME:

JEROME LYLE RAPPAPORT

ADDRESS:

C/O RAPPAPORT OFFICE, 60 STATE ST.

BOSTON, MA 02109

RECIPIENT'S PHONE NUMBER: 617-227-7345

FORM, INFORMATION AND MATERIALS:

N/A

SUBMISSION DEADLINES:

N/A

RESTRICTIONS OR LIMITATIONS ON AWARDS:

N/A

RECIPIENT NAME:
DECORDOVA MUSEUM &
SCULPTURE PARK
ADDRESS:
51 SANDY POND ROAD
LINCOLN, MA 01773-2600
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
GENERAL PURPOSES
FOUNDATION STATUS OF RECIPIENT:
EXEMPT
AMOUNT OF GRANT PAID 369,500.

RECIPIENT NAME:
MARTIN MEMORIAL FUND
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL PURPOSES
FOUNDATION STATUS OF RECIPIENT:
EXEMPT
AMOUNT OF GRANT PAID 2,500.

RECIPIENT NAME:
SMITH COLLEGE
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL PURPOSES
FOUNDATION STATUS OF RECIPIENT:
EXEMPT
AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME:
ACCESS FUND
ADDRESS:
P.O. BOX 17010
BOULDER, CO 80708
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
GENERAL PURPOSES
FOUNDATION STATUS OF RECIPIENT:
EXEMPT
AMOUNT OF GRANT PAID 2,500.

RECIPIENT NAME:
APNE WOMEN WORLDWIDE
ADDRESS:
1615 Q ST NW #208
WASHINGTON, DC 20009
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL PURPOSES
FOUNDATION STATUS OF RECIPIENT:
EXEMPT
AMOUNT OF GRANT PAID 2,500.

RECIPIENT NAME:
WINSOR SCHOOL
ADDRESS:
PILGRIM ROAD
BOSTON, MA 02215
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
GENERAL PURPOSES
FOUNDATION STATUS OF RECIPIENT:
EXEMPT
AMOUNT OF GRANT PAID 1,500.

RECIPIENT NAME:
CAMBRIDGE HEALTH ALLIANCE
ADDRESS:
P.O. BOX 398037
CAMBRIDGE, MA 02139
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
GENERAL PURPOSES
FOUNDATION STATUS OF RECIPIENT:
EXEMPT
AMOUNT OF GRANT PAID 2,000.

RECIPIENT NAME:
CURE ALZHEIMERS FUND
ADDRESS:
34 WASHINGTON STREET
WELLESLEY HILLS, MA 02481
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL PURPOSES
FOUNDATION STATUS OF RECIPIENT:
EXEMPT
AMOUNT OF GRANT PAID 125,000.

RECIPIENT NAME:
COMBINED JEWISH PHILANTHROPIES
ADDRESS:
126 HIGH STREET
BOSTON, MA 02110
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL PURPOSES
FOUNDATION STATUS OF RECIPIENT:
EXEMPT
AMOUNT OF GRANT PAID 7,500.

RECIPIENT NAME:
SOMALY FOUNDATION
ADDRESS:
P.O. BOX 4569
NEW YORK, NY 10163
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL PURPOSES
FOUNDATION STATUS OF RECIPIENT:
EXEMPT
AMOUNT OF GRANT PAID 2,500.

RECIPIENT NAME:
SAMARITANS
ADDRESS:
41 WEST STREET
BOSTON, MA 02111
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL PURPOSES
FOUNDATION STATUS OF RECIPIENT:
EXEMPT
AMOUNT OF GRANT PAID 3,000.

RECIPIENT NAME:
NAMI CAMBRIDGE MIDDLESEX
ADDRESS:
174 APPLETON STREET
CAMBRIDGE, MA 02138
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL PURPOSES
FOUNDATION STATUS OF RECIPIENT:
EXEMPT
AMOUNT OF GRANT PAID 500.

TOTAL GRANTS PAID: 529,000.
=====

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete **only Part I** and check this box ☒ **X**
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete **only Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization JEROME LYLE RAPPAPORT CHARITABLE FOUNDATION C/O RAPPAPORT ASKERKOFF &	Employer identification number 31-1485041
	Number, street, and room or suite no. If a P.O. box, see instructions. 60 STATE STREET, SUITE 1525	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. BOSTON, MA 02109	

Check type of return to be filed (file a separate application for each return):

☐ Form 990	☐ Form 990-T (corporation)	☐ Form 4720
☐ Form 990-BL	☐ Form 990-T (sec. 401(a) or 408(a) trust)	☐ Form 5227
☐ Form 990-EZ	☐ Form 990-T (trust other than above)	☐ Form 6069
☒ Form 990-PF	☐ Form 1041-A	☐ Form 8870

- The books are in the care of ► C/O RAPPAPORT ASKERKOFF & GELLES

Telephone No. ► (617) 227-7345

FAX No. ► _____

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 05/16, 2011, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ☐ calendar year _____ or
► ☒ tax year beginning 10/01, 2009, and ending 09/30, 2010.

2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$ <u>2,064.</u>
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$ <u>2,064.</u>
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ _____

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 4-2009)

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization JEROME LYLE RAPPAPORT CHARITABLE FOUNDATION C/O RAPPAPORT ASKERKOFF &	Employer identification number 31-1485041
	Number, street, and room or suite no. If a P.O. box, see instructions. 60 STATE STREET, SUITE 1525	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. BOSTON, MA 02109	

Check type of return to be filed (File a separate application for each return):

☐ Form 990	☒ Form 990-PF	☐ Form 1041-A	☐ Form 6069
☐ Form 990-BL	☐ Form 990-T (sec. 401(a) or 408(a) trust)	☐ Form 4720	☐ Form 8870
☐ Form 990-EZ	☐ Form 990-T (trust other than above)	☐ Form 5227	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of **C/O RAPPAPORT ASKERKOFF & GELLES**
Telephone No. **(617) 227-7345** FAX No. _____
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- I request an additional 3-month extension of time until **08/15/2011**
- For calendar year _____, or other tax year beginning **10/01/2009**, and ending **09/30/2010**
- If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- State in detail why you need the extension **ALL OF THE INFORMATION REQUIRED TO COMPLETE THE TAX RETURN IS NOT YET AVAILABLE.**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$ 2,064.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$ 2,064.
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature **J. L. C.**

Title **SENIOR OPERATIONS OFFICER**

Date **5/13/11**

Form 8868 (Rev. 4-2009)

FIDUCIARY TRUST COMPANY

P.O. BOX 55806

BOSTON, MA 02205-5806